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ABSTRACT

The author presents some affective educational activities for young children who may be in a mainstreamed setting which addresses some of the misconceptions about exceptional people. Hands on interactions using puppetry, dramatic play, and literature are designed to help children: learn about handicaps; learn about aids such as wheelchairs, communication boards, and hearing aids; understand that handicapped persons, though different, still have much in common with others; understand that children who are handicapped are not responsible for their condition; and articulate their fears. A section on literature contains an annotated bibliography of nine books for children and three books for adults which deal with handicaps. A sample dialogue using puppetry is offered in another section along with guidelines for using puppets with young children. (SB)

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MAINSTREAMING CHILDREN WITH SPECIAL NEEDS

Using Puppetry, Dramatic Play and Literature To Help Young Children Understand Handicaps

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This year, because of increased mainstreaming, almost every American child will have some contact with a handicapped person. For some, the experience will be fearsome and threatening

For example, consider these comments made by non-handicapped children about handicapped peers:

Sam, age 4..."How do you play or go to school or have any fun?"

Joe, age 6..."My mother said, 'Be nice to the poor little deaf boy, but you don't have to have him for a friend.'"

Jenny, age 7..."You're retarded?! That's terrible!"

FEELINGS AND FEARS

These and other conversations illustrate children's perceptions about exceptional persons and their reactions to them. Where do these fears come from, how do they develop, and what can be done to help children overcome them?

Because young children have imaginations, they are most likely to misinterpret and to distort reality and they often have unrealistic fears regarding handicapped persons. Assumptions underlying these fears are: handicapped persons are frightening; and it's not very safe to express my feelings about handicaps as the people "in charge" can retaliate -- your parents have left you at the school and the teacher has "control" over you.

It is a well-documented fact that young children have difficulty distinguishing between fantasy and reality; reason and affect. With

distorted or little real information about handicaps, children seem compelled to understand handicapped classmates by "filling in the gaps" of information for themselves through fantasy. These fantasies generally revolve around childhood fears of punishment and mutilation, transformations, monsters, and even the so-called "realistic" fears.

The natural egocentricity of children and the lack of developed sophisticated reasoning needed to understand handicaps contribute to children's commonly held views that handicaps are "illnesses" or punishments and might be caught by contact with a handicapped person. Young children who are, for example, in a "mainstreamed" setting which includes a child with spina bifida and no educational program, can be particularly prone to such distortions. Their imaginations have already been accelerated by the fact that Johnny had chicken pox last month, and they played with him and then they all got it.

A person in a wheelchair, a person without an arm, a person with a hearing aid can cause reactions ranging from mild worry to outright panic. Adults, when asked about a person with a visible handicap, frequently say, "Don't be silly, there's nothing to be afraid of" without any further explanation! And children just as frequently reject it.

Attitudes and fears toward people we see as "different" from ourselves are learned early from the media and from experiences we have within our families, schools, and communities. From these early experiences we build stereotypes and myths about persons with disabilities.

Because handicapped persons are treated with a "massive prejudice" by our society, children have little opportunity to become familiar with positive role models. The few handicapped persons portrayed on TV, in cartoons, or the movies, are certainly neither very realistic nor positive. Parents say to their children, "Don't stare" as they pass a person in a wheelchair. The parent means to be polite and doesn't want the child to offend the handicapped person, but this admonition of "Stop staring" translates for the child into, "That different person is something to be avoided -- a freak that I must not look at and, therefore, how could I ever be friends with that sort of person?" Thus, a young child must learn how to make friends with a disabled child -- it doesn't happen "by chance". An opportunity where this learning can take place is the mainstreamed classroom.

It has been stated that mainstreaming at the earliest level is a highly defensible concept, but that one cannot assume that increased social interaction will necessarily result in increased sensitivity toward and understanding of, exceptional people. Mrs. Aiello believes that integration of special needs' children in regular classrooms fails not because of the disability, but because of the other children's attitudes. (New York Times, 11/28/78). A systemized, structured program that gives accurate information is thus necessary to insure that maximum benefits of integration are realized. Until there is enough structured contact between special needs' children and other children, no one can sufficiently allay the anxieties, stop the stereotypes, or limit the labels.

Children fear not necessarily what will harm them, but what they think will harm them. They interpret an event in the light of past experience and their present understanding of the situation. On that basis, they infer the event is either harmful or harmless. Through puppetry, dramatic play and literature, the young child can begin to understand and gain control of his fears. Frequently, the adult emphasis on "treating everyone the same" has resulted in not offering much needed information which leads to the child's reluctance to express his normal anxieties.

Also, the young child may be afraid of asking the "wrong" question about taboo subjects. Thus, the mainstreaming of a disabled peer without a proper educational program can precipitate considerable stress on the young child who has no outlet to get straight-forward information about his misconceptions and distorted ideas. Since children generally will talk to puppets more readily than to adults or other children, puppets become the answer to the "Stop staring" syndrome. The puppets tell young children to come and look, touch, listen, love, ask questions, learn and understand. The puppets become realistic role models who teach what it is like to have a handicap. They show the children that even though they are different because of their handicap, they can still lead full and satisfying lives.

ACTIVITIES FOR THE CLASSROOM

The increased mainstreaming or integration of large numbers of previously unserved special needs' children has precipitated the need

for programs to help children recognize that all people want and need to be accepted and valued. These activities emphasize that exceptional people, even though they are handicapped and different, have much in common with their fellow citizens and can participate in most of the so-called "normal activities". As one child stated, "Being handicapped is not as bad as we think it is if we try to understand it." (The Reston Times, 11/16/78.)

With these basic premises in mind, I have endeavored to develop some affective educational activities for the young child using puppetry, children's literature, and dramatic play. The key ingredients for educating and enlightening non-handicapped students about handicaps are age-appropriate instructional materials and experiences. (Glazzard, P. 1979.) The activities provide real information with hands-on interaction that answer questions thus preventing common misconceptions and result in increased awareness, sensitivity and understanding of the needs of all people, but particularly the person with special needs. By using puppets, questions can be asked, fears can be expressed, correct information can be given and understanding can be developed.

The hands-on interactions provide a setting where children can talk about handicaps with responsible and informed adult supervision. The goals are to help children: 1. learn about handicaps; 2. learn about aids, such as, wheel chairs, communication boards, hearing aids, etc.; 3. understand that handicapped persons, though different, are still a lot like us; 4. understand that children who are handicapped

are not responsible for their condition; and 5, articulate their fears.

LITERATURE

The use of children's books dealing with exceptionality themes is one of the most valuable resources in working with young children. There currently exists a number of outstanding books. In addition to providing factual information about handicaps, such stories can initiate discussions of children's own fears and fantasies. An annotated list of some books for this purpose is included at the end of this section.

After reading one of the stories, children can be encouraged to discuss the experiences depicted. The following questions apply to most books about exceptionality:

- Why do you think the child is handicapped?
- How do you think the child feels about his handicap?
- What kind of things can the child do? Are they the same things you can do? Are they different? If so, how?
- What makes the child feel good?
- Do those same things make you feel good?
- What makes the child feel sad?
- Do those same things make you feel sad?
- What kinds of things do you think are scary to the child?
- Are those same things scary to you?
- How do you think the child feels about coming to school?
- What kinds of things happen to him at school?
- How is our school different from the one in the book?

- How does the child feel when he makes friends?

Through such questions, children often begin to express their own feelings about handicaps. Misconceptions and distortions should be corrected, but never in a ridiculing or negative manner.

ANNOTATED BIBLIOGRAPHY FOR CHILDREN

Allan Brightman, Like Me, Little, Brown and Company, Boston, 1976.

Using gentle poetry illustrated with photographs, the story introduces the concepts of similar and different human attributes. It expresses the idea that although to be retarded may be to be different, "I hope you can see/Just how much/You're like me."

Joan Fassler, Howie Helps Himself, Albert Whitman & Company, Chicago, 1976.

Howie is a young boy with cerebral palsy who must use a wheelchair. This story introduces the reader to Howie's frustrations and his ambition: to move his wheelchair by himself.

Joe Lasker, He's My Brother, Albert Whitman & Co., Chicago, 1974.

Jaime's brother is the narrator of this story, and shares with the reader some of Jaime's hurts and frustrations that evolve from being a developmentally slow learner. Jaime's brother also shares some of Jaime's loves and feelings in language a six-year-old can understand. Soft water colors illustrate the book.

Joe Lasker, Nick Joins Us, Albert Whitman & Company, 1980.

This is a story of a wheelchair confined student's entry into a public school. Pictures help reinforce Nick's emotions, from fear and isolation to pride and self-worth as the class learns

to accept him as he is.

Ada B. Litchfield, A Button in Her Ear, Albert Whitman & Company, Chicago, 1976.

The story is told from Angela's point of view. She is the refreshingly straight forward, ball-playing protagonist who explains about the "button in her ear", and how it was discovered that she needed it. Angela's independence and resourcefulness emerge throughout the story.

Elaine Ominsky, Jon O., A Special Boy, Prentice-Hall Inc., 1977.

Jon O. is a child with Down's Syndrome. He is a special boy with a special problem, Jon O. is different. This book shares some of Jon's frustrations and exhilarations in words a six or seven-year-old can read and understand.

Jeanne Whitehouse Peterson, I Have A Sister, My Sister Is Deaf, Harper & Row, Publishers, New York, 1977.

Detailed black-and-white drawings provide a warm, secure background for the story of a deaf girl and her sister. It relates how the deaf child learns to communicate with the world around her. The story is told by the deaf child s sister, who with love and understanding relates the possibilities and limitations her sister lives with.

Margaret Reuter, My Mother Is Blind, Children's Press, Chicago, 1979.

This book uses color photographs to reinforce the realistic presentation of this story. It expresses what being blind means, not just to the individual, but to the whole family. And although his mother is very capable, and has relearned numerous things, the

young narrator of the story is still permitted to wish his Mom could see.

Harriette Robinet, Jay and the Marigold, Children's Press, Chicago, 1976.

Without pity, this book explains the physical limits that cerebral palsy has placed on Jay while it explores his joy in watching a flower grow in a crack between some steps. There are parallels made and implied between Jay's and the flower's condition, and how they both can bloom.

Sara Bonnett Stein, About Handicaps, Walker and Company, New York, 1974.

The purpose of this book is to provide the parent or adult a method to facilitate the explanation of handicaps to young (3-8 year old) children. The photographs with large, easy text is accompanied by a more detailed text to help the adult precipitate the needs and questions of the young person with whom he/she is sharing the book.

FOR ADULTS

Ellen Barnes, Carol Berrigan & Douglas Biklen, What's the Difference? Human Policy Press, Syracuse, New York, 1978.

The purpose of this text is to facilitate the teaching of positive attitudes towards people with disabilities. Various activities have been devised to heighten an awareness of the possibilities of handicapped people.

Doug Biklen and Ellen Barnes, You Don't Have to Hear to Cook Pancakes, Human Policy Press, Syracuse, New York, 1978.

This is a workbook that suggests activities to sensitize people to the problems of the handicapped and to explore how those people might think or feel. For example, one activity suggests taping

down all the fingers of your weaker hand and then trying to eat a cup of raisins, It helps to explore and understand some of the feelings that people with physical disabilities experience.

Douglas Biklen and Michele Sokoloff, ed., What Do You Do When Your Wheelchair Gets A Flat Tire? Human Policy Press, Syracuse, New York, 1978.

This book attempts to answer many of the questions about disabilities that are asked in public schools. People with different handicaps explain how they feel, how their handicaps make them different, and what they can and want to do. It is a compilation of handicapped children's answers to many questions.

PUPPETRY AND DRAMATIC PLAY

Not all children can verbalize their thoughts and feelings about handicaps. For them, puppetry and dramatic play provide valuable outlets. A puppet is any inanimate object which a human person makes talk and move. In its simplest form, puppetry is the extension of the puppeteer talking through the puppet. To use puppet play with young children, I feel, it is best to put aside any attempts at a formal presentation of a story or a play.

A more productive approach emphasizes the involvement of children and the planning and skill of an adult teacher/facilitator. The teacher/facilitator sits immediately in front of the children and encourages interaction between the children and the puppet. The puppet interacts with the children by asking for help, disagreeing/agreeing with the children, making comments, etc. The children interact with puppet(s) by asking questions, commenting on what is happening and by making suggestions. This interaction is enhanced by the teacher/facilitator clarifying what the puppet is trying to communicate and helping the children put their ideas into words. The facilitator demonstrates safe involvement with the puppet, thus providing a model for encouraging child involvement.

This interactional approach for using puppets is especially powerful in helping children express their feelings and ask questions that are responded to with realistic and correct information. The puppet can nurture a sensitivity to problems that arise between special needs' and non-special needs' children.

For example, one problem might be the unfavorable judgment that is often made about a person's worth on the basis of his handicap.

Puppet: Lisa?

Teacher/facilitator: Yes?

Puppet: I've got something important I want to talk about.

Lisa: (Teacher/facilitator): Well, what is it, Barnaby?

Barnaby: It's something that's kind of hard for me to talk about. It's about this kid in my class.

Lisa: What kid in your class, Barnaby? Someone that I know?

Barnaby: Well, this kid in my class named Kathy.

Lisa: Oh, you mean the one with the blue eyes and blonde braids?

Barnaby: Uh huh. I think there's something seriously wrong with her.

Lisa: What do you mean?

Barnaby: Well, you see, she shakes when she tries to do anything like color. She can't write or go to the bathroom by herself, and when she eats, she gets cake all over her face and hands. She just can't do anything. No one will play with her. She wants to be friends with the kids, but everyone is afraid of her.

SCENE II: (in wheelchair)

Kathy Puppet: Oh, I wish I had a friend. I'm sad.

Lisa: Kathy, I'll be your friend. I'm not afraid of you.

Kathy: Thank you, Lisa. That helps.

Lisa to children: But Kathy still feels sad. What's the problem?

Child(ren): She wants someone to play with, but they're afraid of her. No one wants to play with her.

Lisa: Well, why do you think they are afraid?

Child(ren): 'Cause they think she might hurt them or they can catch it . . but that's not true.

Kathy: No, I won't hurt them. You see they're afraid of me because I have a handicap.

Lisa to child(ren): Does anyone know what a handicap is?

Child(ren): Answers ranging from a broken leg to being old.

Lisa offers this definition: "A handicap is a problem some people have that makes it hard for them do things that are usually easy for other people to do." (Samples P., 1980). Kathy, why don't you tell them about your handicap?

Kathy: I have cerebral palsy, which is why I walk and talk differently than you do. I was born that way, so I've never been able to do all the things you can do. You see, the part of my brain that controls certain muscles in my mouth and legs was injured when I was born, so I cannot control my body as well as you. But I can do lots of things. I can play games, play

ball, think, dream, read, eat, laugh ...

Understanding the nature of handicapped persons is an important step in overcoming fears about handicapped peers, and becoming friends. In this non-threatening way, children have accurate information presented which then allows them to accommodate this new information and modify their existing misconceptions. In each interaction, the goal is to help children learn developmentally appropriate information and skills which will aid them in understanding and making friends with special needs' peers.

After the skit is over, the teacher/facilitator should meet with the children to discuss the show, clarify any misunderstandings, and reinforce the points brought out by the story. If time permits, a group activity that strengthens the intended goals of the dialogue could be presented for follow-up. For example, the above skit could be followed by a body-awareness activity like body drawing. This stresses how alike, but "different", we all are.

Because of the enthusiasm young children have for brief and informal puppet shows, they are especially effective as teaching strategies.

THINGS TO REMEMBER ABOUT PUPPETS AND YOUNG CHILDREN

Children react initially to a puppet's appearance. If the puppet is soft and cuddly, the child perceives him as a gentle sort. Puppets work because they are safe, the imagination can take over -- "It's him, not me." Animals are especially good because they are one more step closer to fantasy. Animals can be any race or sex -- they are,

for the most part, "neutral".

In approaching young children with a handicapped puppet, assume the children are frightened. Have the puppet face you, so children know if the puppet is going to attack, it will attack you and not them. Stroke the puppet nicely and engage him/her in a conversation. "Arguments" that children can get involved in and win are very effective.

It is imperative that the children know you are making the puppets talk, and that it is all pretend. If you lie about who's talking, then children assume you will lie about other things, too. Thus, it's important if you are asked, "How's he talking?" to tell them immediately, or that becomes the focus of the show. I would say something like, "See, I'm making him talk, but we'll pretend the puppet is talking." Young children are fascinated by puppets and immediately accept the magic that is giving them life.

SUMMARY

Because of children's misconceptions, the mainstreaming of a special needs' child can cause anxiety and fear. This anxiety and fear reduces sensitivity toward, understanding of, and positive interaction with handicapped peers. The role of the early childhood teacher becomes particularly important in presenting factual information about handicaps that young children can understand. Because of the nature of the young child, this information can best be presented through appropriate literature, puppets and dramatic play.

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